



Final Accreditation Report

**Armed Forces Retirement Home-Gulfport
1800 Beach Drive
Gulfport, MS 39507**

**Organization Identification Number: 549475
60-day Evidence of Standards Compliance Submitted: 9/1/2021**

ESC Programs Reviewed

**Home Care
Ambulatory
Nursing Care Center**

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The Joint Commission Executive Summary

Program	Submit Date	Event Outcome	Follow-up Activity	Follow-up Time Frame or Submission Due Date
Home Care	9/1/2021	No Requirements for Improvement	None	None
Ambulatory	9/1/2021	No Requirements for Improvement	None	None
Nursing Care Center	9/1/2021	No Requirements for Improvement	None	None

The Joint Commission Requirements for Improvement Summary

Program: Home Care

Standard	Level of Compliance
NPSG.03.06.01	Compliant
PC.01.03.01	Compliant
PC.02.01.03	Compliant

The Joint Commission Requirements for Improvement Summary

Program: Ambulatory

Standard	Level of Compliance
HR.01.06.01	Compliant
IC.02.01.01	Compliant
IC.02.02.01	Compliant
NPSG.01.01.01	Compliant
RI.01.03.01	Compliant
UP.01.03.01	Compliant

The Joint Commission Requirements for Improvement Summary

Program: Nursing Care Center

Standard	Level of Compliance
EC.02.02.01	Compliant
IC.01.03.01	Compliant
IM.02.02.03	Compliant
LS.02.01.50	Compliant

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Appendix

Standard and EP Text

Program: Home Care

Standard	EP	Standard Text	EP Text
NPSG.03.06.01	3	Maintain and communicate accurate patient medication information.	Compare the medication information the patient is currently taking with the medications ordered for the patient in order to identify and resolve discrepancies. Note: Discrepancies include omissions, duplications, contraindications, unclear information, and changes. A qualified individual, identified by the organization, does the comparison. (See also HR.01.06.01, EP 1)
PC.01.03.01	5	The organization plans the patient's care.	The written plan of care is based on the patient's goals and the time frames, settings, and services required to meet those goals.
PC.02.01.03	4	The organization provides care, treatment, or services in accordance with orders or prescriptions, as required by law and regulation.	The organization reviews orders and prescriptions for appropriateness and accuracy before providing care, treatment, or services.

Program: Ambulatory

Standard	EP	Standard Text	EP Text
HR.01.06.01	5	Staff are competent to perform their responsibilities.	Staff competence is initially assessed and documented as part of orientation.
IC.02.01.01	2	The organization implements infection prevention and control activities.	The organization uses standard precautions, * including the use of personal protective equipment, to reduce the risk of infection. (See also EC.02.02.01, EP 4) Note: Standard precautions are infection prevention and control measures to protect against possible exposure to infectious agents. These precautions are general and applicable to all patients. Footnote *: For further information regarding standard precautions, refer to the website of the Centers for Disease Control and Prevention (CDC) at https://www.cdc.gov/hicpac/recommendations/core-practices.html (Infection Control in Healthcare Settings).
IC.02.02.01	2	The organization reduces the risk of infections associated with medical equipment, devices, and supplies.	The organization implements infection prevention and control activities when doing the following: Performing intermediate and high-level disinfection and sterilization of medical equipment, devices, and supplies. * (See also EC.02.04.03, EP 4) Note: Sterilization is used for items such as implants and surgical

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Standard	EP	Standard Text	EP Text
			instruments. High-level disinfection may also be used if sterilization is not possible, as is the case with flexible endoscopes. Footnote *: For further information regarding performing intermediate and high-level disinfection of medical equipment, devices, and supplies, refer to the website of the Centers for Disease Control and Prevention (CDC) at https://www.cdc.gov/infectioncontrol/guidelines/disinfection/#r3 (Sterilization and Disinfection in Healthcare Settings).
NPSG.01.01.01	1	Use at least two patient identifiers when providing care, treatment, or services.	Use at least two patient identifiers when administering medications, blood, or blood components; when collecting blood samples and other specimens for clinical testing; and when providing treatments or procedures. The patient's room number or physical location is not used as an identifier. (See also MM.05.01.09, EPs 7, 10; PC.02.01.01, EP 10)
RI.01.03.01	1	The organization honors the patient's right to give or withhold informed consent.	The organization follows a written policy on informed consent that describes the following: - The specific care, treatment, or services that require informed consent - Circumstances that would allow for exceptions to obtaining informed consent - When a surrogate decision-maker may give informed consent (See also RI.01.02.01, EP 2) (See also PC.01.02.07, EP 5)
UP.01.03.01	2	A time-out is performed before the procedure.	The time-out has the following characteristics: - It is standardized, as defined by the organization. - It is initiated by a designated member of the team. - It involves the immediate members of the procedure team, including the individual performing the procedure, the anesthesia providers, the circulating nurse, the operating room technician, and other active participants who will be participating in the procedure from the beginning. Note: For organizations providing telehealth surgical services: Based on current UP requirements, telehealth staff who are physically present in the operating room and participating in a surgical procedure are actively involved in the timeout.

Program: Nursing Care Center

Standard	EP	Standard Text	EP Text
EC.02.02.01	5	The organization manages risks related to hazardous materials and waste.	The organization minimizes risks associated with selecting, handling, storing, transporting, using, and disposing of hazardous chemicals.
IC.01.03.01	1	The organization identifies risks for acquiring and spreading infections.	The organization identifies its risks for acquiring and spreading infections based on the care, treatment, and services it provides. (See also

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Standard	EP	Standard Text	EP Text
			IC.02.05.01, EP 2)
IM.02.02.03	2	The organization retrieves, disseminates, and transmits health information in useful formats.	The organization's storage and retrieval systems make health information accessible when needed for patient and resident care, treatment, and services.
LS.02.01.50	10	The organization provides and maintains building services to protect individuals from the hazards of fire and smoke.	All linen and waste chute inlet service doors have both self-closing and positive-latching devices. All linen and waste discharge service doors are self-closing. Note: Discharge doors may be held open with fusible links or electrical hold-open devices. (For full text, refer to NFPA 101-2012: 18/19.5.4; 8.3.3.1; 9.5; NFPA 82-2009: 5.2.3.2.3; Tentative Interim Amendment [TIA] 09-1)